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ABSTRACT

Presented are 11 papers from a seminar entitled Secondary Programs for the Adolescent with Learning Disabilities. Entries include the following titles and authors: "Parent-Adolescent Interaction" (D. Ellis); "The Development of the Adolescent Self-Concept" (M. Smith); "The Self-Concept of the Learning Disabled Adolescent" (B. Lockett); "Brief Reaction to Handicap by Children and Adolescents" (M. Robertson); "Cognitive Development and Communication Patterns among Adolescents" (G. Goodwin); "Peer Group Effect on Adolescent Development" (M. White); "Communication and Counseling with Parents of the Learning Disabled Adolescent" (B. Thomason); "Reading Disabilities of Secondary Students" (A. Perry); "New Trends in Reading and Various Reading Techniques" (G. Gellman); "Qualifications of Teachers of Learning Disabled Adolescents" (G. Hickman); and "Post Secondary Programs--A Synopsis" (A. Scott). (SBH)

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EDUCATIONAL CONSIDERATIONS FOR THE LEARNING DISABLED ADOLESCENT: SELECTED PAPERS

Edited by

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In memory of Boyd R. McCandless

whose influence is documented throughout

this manuscript and whose concern for

the adolescent with learning disabilities

was evident to those who knew him.

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FOREWORD

Public school programs for learning disabled students at the secondary level have been a recent development. The first high school program in Georgia was initiated during the 1971-72 academic year with some junior high or middle school programs being initiated a year or two before. Although public school programs for students with learning disabilities were established at the elementary level in the latter half of the 1960's, little attention was given to the adolescent population with learning disabilities until the early 1970's.

The reasons for the delay in offering educational services for the learning disabled adolescent are many but were no doubt influenced by recognized benefits of early identification and treatment, parent efforts to gain attention and services for elementary aged children initially, and consequently the delay in training of teachers for students at the secondary level.

Initial efforts in learning disabilities followed the premise that the earlier the treatment was started the greater the probability of successful correction or amelioration of the disability. Although most learning disability specialists still support the principle of "the earlier the better," it is also accepted that even with positive expectations and the best remedial and corrective procedures available, some students continue to experience academic difficulties past the elementary school years.

The early efforts by parents through the Association for Children with Learning Disabilities were to get educational programs started. Since the general philosophy was "the earlier the better" and because many parents associated with the group had children in the elementary grades, the major thrust was to get school systems to start programs at the

elementary level. Parents of older children who were active in the parent organization seemed to accept the fact that these programs came too late for their child and thus they also supported the development of early education programs for children with learning disabilities. As a larger number of parents became involved and as a good percentage of children identified in the elementary years began to move into the secondary level, it was soon recognized that not all learning disabilities are corrected at the elementary level. Parents and educators alike have come to recognize that a large percentage of the learning disabled population will continue to experience academic difficulties in the adolescent years without adapted educational techniques to circumvent or take into account the specific learning needs of the student. Thus "parent power" has once again emerged as an important factor in promoting educational programs for the learning disabled at the secondary level.

With the emphasis upon early identification and treatment, educational programs for teachers have focused on training educators for the primary and elementary years. Secondary programs which have been initiated to date have primarily been staffed by personnel with experience in teaching the adolescent age group but with training in learning disabilities at the elementary level. With the demand for teachers at the secondary level to work with the learning disabled adolescent, colleges and universities are being pressed to develop training experiences for learning disablity personnel at the secondary level. As has been the usual procedure in education the demand for services has preceded the development of a knowledge base upon which to establish the training experiences. The need for personnel and the absence of a knowledge base regarding the nature of the adolescent with learning disabilities have been additional factors delaying

the development of secondary programs.

In recognition of the needs of secondary students with learning disabilities, educational programs have been initiated in increasing numbers over the past four years. During the Fall and Spring of 1973-76, several secondary learning disabilities teachers in the Metropolitan Atlanta area expressed the need for additional knowledge regarding the education of the adolescent with learning disabilities. In response to this expressed need, a seminar was offered during the Fall Quarter 1974 entitled Secondary Programs for the Adolescent with Learning Disabilities. The purposes of this course were:

1. To explore current secondary learning disabilities programs.
2. To examine teaching materials and methods found useful for the adolescent age group.
3. To review the literature on selected topics related to the adolescent with academic problems.
4. To develop a model plan for programs to serve the adolescent with learning disabilities.

Purpose number three (3) above resulted in the contents of this document. These selected papers represent the concerns and interests of the teachers participating in this seminar. All of the participants were actively engaged in programming for adolescents with learning disabilities and were anxious to seek out as much information as possible relating to the educational and social needs of this population. In order to provide for a systematic effort, topics of concern were enumerated by each participant, topics were grouped or consolidated and then each participant selected a topic to explore. As is noted in most papers, literature dealing with the adolescent with learning disabilities was sparce, thus the content was drawn heavily from normal and abnormal adolescent development with the resulting information selected being heavily influenced by the

ecological factors surrounding these teachers daily in their efforts to provide a quality educational program for the learning disabled adolescent.

The importance of the type of personal interaction that occurs between the parent and the adolescent is described by Ellis. Information is given about the nature of adolescents and how parents often get into a tug-of-war which actually makes the natural behavior of adolescents beneficial and thus destructive of interpersonal relationships between the parent and the adolescent. Parent-adolescent interaction can influence the natural development of an adolescent's self-concept. The dynamics of this development are presented by Smith. Definitions of adolescence and self-concept are outlined and factors influencing the development of an adolescent's self-concept are included. A good adult model is considered one of the most important factors involved in the establishment of a healthy self-concept for the adolescent. Aspects of development that an adult model needs to understand and keep in mind are presented.

The literature on self-concept and how this relates to the learning disabled adolescent is reviewed by Lockett. She notes that most of the literature describing the self-concept of the learning disabled adolescent is of the testimonial or clinical observation variety. Based on the (1) theoretical structures of how the self-concept evolves, (2) the generally negative world of the learning disabled adolescent and (3) the self-concept research literature from other handicapping conditions, some parallel conclusions are drawn as to the influence a learning disability will have on the developing self-concept during adolescence. A child with a learning disability will often have to make some adjustments in his self-concept during the period of adolescence. Robertson discusses one observable phenomenon which often occurs in handicapped children, usually around the

age of preadolescence or adolescence when a child suddenly becomes aware of the reality of his handicap. In describing the child's reaction, Robertson relates it to a parent's initial reaction in accepting the birth of a handicapped child. This phenomenon is referred to as "grief reaction" and demands the attention and understanding of parents and professionals involved in the education and social adaptation of the adolescent. With positive parent-child interaction and supportive measures from outside sources, the process of grief reaction may follow its course with gradual reduction of trauma until it resolves itself into bringing the real and ideal concepts closer together. Appropriate resolution of the grief reaction must occur if cognitive development is to progress at an optimum level.

Interference in cognitive development is perhaps the primary factor causing the label "learning disabled" to be assigned to a youngster experiencing learning difficulties. Goodwin explores the normal cognitive development of children and adolescents and the roles of communicative patterns among adolescents in fostering cognitive exploration. The basic question raised in this paper is "How do difficulties in understanding the communication of others interfere with reciprocal interactions during adolescence and thus further compound the influence on the learning disability?" Communication patterns play an important role in peer group relations during adolescence.

White's emphasis centers on the scope of the influence of peer group relations during this age. Social rejection by peer groups can impair ability to learn as well as psychological growth adjustment. Adults who deal with young people need to appreciate fully the significance of peer groups in the lives of adolescents. White's review attempts to enlighten

parents and teachers about the importance of peer group influence so that they may come to appreciate and understand the significance of such influences and perhaps learn to work together to make use of this knowledge.

Parent-teacher communication is highlighted in the paper by Thomason. She summarizes some of the problems faced by the educator in terms of background of training as well as territorial rights to the counseling process which may be imposed by other disciplines operating within the school environment. Thomason presents some basic principles which must be followed if a positive effect is to be achieved by teachers in communicating to parents the special needs, problems and success of students who have reached the secondary level in school and still have existing learning disabilities.

Perry explores the problems faced by the adolescent who continues to have a reading disability in the secondary school years. She indicates that many secondary teachers respond by "giving up on the student." With repeated instances of disapproval, the student becomes susceptible to undesirable influences and frequently may resort to seeking approval through delinquent behavior. Perry concludes her paper by reviewing different philosophies regarding instruction for the reading disabled adolescent and reading approaches which have been tried.

Only in the past several years have educators begun to focus on the problems of secondary students with reading disabilities. Gellman examines the role that content teachers in the high school may take in reading development. New trends in reading and high school curriculum changes are examined. Included are some suggested techniques that have been modified to teach the secondary student and may be incorporated into content area programs at the secondary level.

The growth of learning disability programs at the secondary level is

partially dependent on the training of teachers for work at this age level. Hickman explores dimensions related to teacher training for secondary LD teachers through gathering of original data. Two dimensions are explored: a sampling of institutions with established LD programs to see if they offer or plan to offer course work for the secondary LD teachers and a sampling of secondary LD teachers to see what experience and personality factors are thought to be important for the teachers of secondary LD students.

In recognition of the fact that some learning disabled adolescents have the potential and need for continuing their academic training beyond the high school, Scott reviews some of the post-secondary programs which have been protrayed as being designed for the learning disabled student. It should be noted that the infomation reported is based on written documents, telephone conversations or visits to the facility to obtain descriptions of the programs. No opportunity was available to evaluate the programs on a first hand basis. Nonetheless, Scott's paper does point up the fact that many opportunities are developing in this much needed area of post-secondary training for the learning disabled youth.

December, 1975
Atlanta, Georgia

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PARENT-ADOLESCENT INTERACTION

Donna Ellis

This paper focuses on the parents of adolescents, in the belief that analysis of the home atmosphere and environment holds the key to a more profound understanding of the psychology of the teen years than can be had from most other sources.

The adequate parent may be characterized as the parent who finds satisfaction and happiness in the mate, and who looks upon his function of parenthood as requiring of him deep concern in the welfare of his offspring, interest in his interest, pride in his achievement, sympathy in his problem. The adequate parent is one who is ready and anxious to guide and advise or lend a listening ear, without feeling constrained to dictate, "nag", or prohibit (Averill, 1946).

Most prominent among sources of conflict in the home are those parents who are themselves in conflict with each other. If there is any institution in the world in which an absence of conflict is most desirable, surely that institution is the home where there are children growing up.

A large proportion of the parent generation has lost step with youth. In some cases, it is the parental preoccupation with pressing social and business obligations which lies at the bottom of the trouble. In other cases, it is the failure on the part of the parent to comprehend the full significance of the drives that are operative in adolescents. Of the two, perhaps the latter factor is the most disastrous in its ill effect upon the development of the personalities and character of youth.

Kvaraceus (1959) recognizes the universal nonconformity of adolescents.

He speaks about the "continuum of norm-violating behavior." On the one end of the continuum are the adolescents whom you can't get up in the morning, or to bed in the evening, who refuse to put their things away, or do their homework or to help around the house, who either eat too much or too little--in other words, the average American child. And on the other extreme of the continuum is the juvenile delinquent with his open defiance of society and its norms. There is no qualitative, only a quantitative difference between them.

Literature abounds with evidence that a child's perception of his parents is clearly related to his behavior in several ways (Nihira et al., 1972). While delinquents perceive parents as overly permissive, child guidance patients and maladjusted normals are more apt to report parents as psychologically excessively controlling. All deviant groups are more likely to report parents as punitive, rejecting and neglecting.

As a part of a pilot study of adolescents' crisis behavior and their life situations, the Bronfenbrenner Parent Behavior Questionnaire (BPB) was used to analyze parents' behavior as perceived by an adolescent population admitted to the Adolescent Crisis Ward at U.S.C. Medical Center.

The data indicated that patients perceived their parents as significantly more punitive, using physical as well as nonphysical punishment such as deprivation of privileges and social relationship or overt rejection of their children. These parents are also significantly more intrusive and restrictive of the child's behavior and have high achievement demands in the eyes of their children.

McPherson (1972) describes a method of intensive, therapeutic assessment of families. The approach was developed as part of a research effort designed to study coping styles in adolescents.

There often exists a difference in the manner in which a clinician views an adolescent child's emotional turmoil from the way it is viewed by the child's family. The family often considers their child's problem as separate from the family. The clinician tends to view the family--including the disturbed child--as a unit. The symptoms of the child provide information about the problem that exists in the family unit. The family is considered to be a system within its social network, a "quasi stable feedback-regulated information processing system" (Lewin, 1947), in which balance is maintained by means of forces operating within the system. The word "forces" in this context refers to all those intra and interpersonal dynamics that exist within a family.

A healthy family system may be thought of as one in which all family members enjoy well-being. The level of conflict or tension within the family is low. Communication is flexible and the system is responsive to the environment. In a maladjusted family system on the other hand, homeostasis is often maintained by a number of maladaptive mechanisms. Communication tends to take the form of no or minimal exchange of information or the focus is upon one family member who is disturbed, "causing trouble for all."

The varied and complex drives of adolescence should make clear why it is and must be first of all within the family circle that the drama of adolescence is acted out (Farnham, 1951). For until and unless maturity is accomplished here, it cannot be accomplished at all. The initial need is to assert some sort of freedom from family control. All the signs of defiance and estrangement are going to be confusing unless they are understood and a sense of humor about them is strenuously cultivated (Zachry, 1940).

Parents will react to the defiance of their adolescents in various ways, ranging from violent determination to bring the youngster to book, to a kind of lackadaisical acceptance of whatever is done and an indulgence of every whim. Generally there is a hopeful balance between the two extremes and some sort of reconciliation to the changing young person is accomplished.

The radical changeability of adolescents is disturbing and alarming to parents. There is no way of knowing what to expect. We observe the youngster doing two things at once--acting like a baby, being dirty, disorderly and irresponsible, yet displaying other attitudes that are consistent with his age. Sometimes he is even more thorough in his reversion to childhood. Abandoning momentarily the drive toward independence, desiring only to remain in the family and enjoy the security and satisfaction of parental love, he may make all the old demands on his parents, turn to them for direction and guidance in every detail and seem utterly unable to do for himself. Mixed with the dismay produced by this tendency of adolescents to go backward in their development is often a certain satisfaction. The mother feels as if she were getting back the child she so much loved and enjoyed, and the father is happy to see his youngster once more quiet and orderly and to be relieved of the recurrent "problems". The child's greater willingness to confide, and his amiability and compliance combine to flatter and elevate the parents' sense of their importance in his life.

But neither does this last. Harmony again gives way to rebellion; co-operation becomes again a thing of the past. Admittedly, these changes are difficult to take. In order to be tolerated at all, they must be seen as two different phases of a unified process which follows not a straight

forward but an alternately backward and forward course.

The rapidity with which these changes occur is also upsetting. Not until the issue of maturity is solved will periods of disturbance and rebellion be a thing of the past (Munns, 1972).

Co-operation is always a thought that appeals in the business of parent-child relationship. But co-operation at times may be a spot difficult to get. There is no greater artist at evasion than the adolescent. It is all agreed that family tasks will be done on some arranged basis. However, parents often find that the assigned tasks of the adolescent have been totally ignored. These exasperating demonstrations, however, are interspersed with others which are at the opposite extreme. Again, vascillation from total lack of co-operation to unquestionable obedience is the observed pattern.

The symptoms of awakening interest in the opposite sex are first apparent in the family. The slogan is: "Everyone else is doing it, I don't see why I can't." All of this can cause a great uproar in the home. At first the parents may resist strongly and attempt to control and regulate the whole business out of existence. Unless parents have a guiding philosophy on which they themselves can rely, there is a good possibility that youngsters will manage to bring about whatever they decide on. It all seems to be done by a process of erosion and gradual wear and tear which breaks down parental resistance. At the same time, the parents are getting used to the idea that ultimately the youngster must have his freedom.

Now is the time when the relationship that has been built between the parents and the children shows its strength or weakness. The mother's attitudes particularly play a large role. This is not because the role

of the father is unimportant, but because so often the mother's role had been dominant.

Peterson (1968) conducted a study for the purpose of exploring the relationship between adolescents and their parents. The sample consisted of 2,293 male and 2,482 female adolescents from twenty-seven high schools, representing all major regions of the U.S. Each student completed a questionnaire measuring his parents' interest in and control of his activities. The results indicated that first, adolescents perceived that their parents exercised high control and high interest in their activities. Secondly, females experienced greater parental interest and control than males, and finally, adolescents perceived that the mother had greater interest and control in adolescent activities than the father.

When reviewing the findings of this research, it seems especially important that adolescent children perceive the greater majority of American parents in this research as expressing rather extensive control efforts and high interest. The second finding is well known to most students of the family: the female adolescent experiences greater control efforts from both of her parents than the male adolescent. Not so well known is the apparently greater interest parents have in their adolescent daughters in contrast with that for their adolescent sons. Possibly parental interest in the adolescent female is closely related to parental control.

Probably the most important finding of this research is the third: Mothers have a major role in child-rearing, even when the child is an adolescent. Apparently mothers enact their dominant role regardless of the sex of the child. It was found that parents perceived as having high control and interest tend to have adolescent sons who are non-delinquents, perceive themselves as happy, have relatively favorable attitudes toward

school, have many worries, chiefly dealing with achievement, have a high interest in religion and have many adolescent male friends.

Conversely, parents perceived as having low control and interest tend to have adolescent sons who are juvenile delinquents, perceive themselves as being unhappy, have relatively unfavorable attitudes toward school, have relatively few worries, have a low interest in religion, and have few adolescent male friends. Of course, these relationships are not "all or none" propositions. There are many exceptions.

In the above, the middle class syndrome clearly emerges. Adolescent behavior consistent with the striving, improving, joining, achieving, etc. posture of the middle class is apparent.

Every culture and civilization develops a definite pattern for raising children. Even in primitive societies all behavior was established by tradition. Our western culture has been more complex than primitive societies, but nonetheless it has had its traditional patterns for child-raising. However, our growing perception of the meaning of democracy and its effects upon interpersonal relationships has profoundly changed this culture. The implication of the growth of that democracy is not just a political ideal, but a way of life. Rapid changes take place, but few are aware of the nature of this change. It is largely the impact of democracy that has transformed our social atmosphere and made the traditional methods of child-raising obsolete (Dreikurs, 1964).

It is interesting to note that as soon as the democratic development affects any country anywhere in the world where people have lived under autonomous cultural conditions and where children have behaved according to the cultural patterns of their own environment, the children are now beginning to misbehave in a similar manner, causing the same distress to

their parents and teachers as we find in the U.S.

In an autocratic society, the ruler was superior to and had power over the submissive. Regardless of his station in the world, the father of each family ruled over the members, including his wife. Today this is no longer true. Women proclaim their equality with men, and as the husband lost his power over his wife, both parents lost their power over their children. This was the beginning of a general social upheaval that has been widely felt but little understood.

Dreikurs (1968) suggests that children are particularly sensitive to a social climate. They have been quick to catch on to the idea that they share in the equal rights of everyone. They sense their equality with adults and no longer tolerate an autocratic dominant-submissive relationship. Parents, too, vaguely realize that their children have become their equals and have lessened the pressures of the you-do-as-I-say form of child-raising. At the same time, they lack new methods based on democratic principles with which to guide and educate their children into democratic social living. Thus, we are faced with our present dilemma.

Parents and educators alike sincerely want to be democratic. However, there is a widespread confusion about application of democratic principles. As a result, we have frequently mistaken license for freedom and anarchy for democracy. To many, democracy means freedom to do as one pleases. Children have reached the point where they defy restrictions because they assume their right to do as they please. This is license, not freedom. If each member of the family insists on doing as he pleases, we have a houseful of tyrants with resulting anarchy. When everyone does as he pleases, the result is constant friction. Friction disturbs interpersonal relationships, which in turn intensifies the conflict. In an atmosphere

of such constant conflict, the negative aspects of social living flourish.

The subtle point that we cannot have freedom unless we respect the freedom of others is seldom recognized. Parents have taken the disastrous consequences of the excess freedom assumed by their children. The children, without knowing what bothers them, sense the loss of order because there are no restrictions to guide them. They become more concerned with getting their own way than with learning the principles and restrictions necessary for group living. As a result, the ever present capacity for social interest remains underdeveloped. This has resulted in a sense of confusion and has increased the maladjustment of children. At no period in a child's development is this more evident than during adolescence.

To help our children, we must turn from obsolete autocratic methods of demanding submission to a new order based on the principles of freedom and responsibility.

The relationship between the parents sets the pattern for all the relationships within the family. If the parents are warm, friendly, and cooperative, the same relationship may possibly develop between children and parents and between the children themselves. Cooperation can become a family standard. If the parents are hostile and compete with each other for dominance, the same pattern usually develops among the children. The relationship between the parents gives the children a guideline from which they may choose to develop their own individual roles.

Since democracy implies equality, parents can no longer assume the role of "authority". Authority implies dominance, and there can be no such dominance among equals. Dominance, force and power must be replaced

with equalitarian techniques of influence.

Punishment and rewards belong properly in the autocratic social system. In a democratic home environment, Dreikurs (1968) suggests a child should be allowed to experience the consequences of his acts, rather than be punished by the parent. This provides an honest and real learning situation. There are many times when a parent has a golden opportunity to allow the consequence of misbehavior to take effect. However, due to their desire to "protect" the child, they deprive him of the consequence and punish him in their own way with scolding or a sermon. In a democratic society we "guide" our children, we do not "control" them by imposing our will.

Consequences with adolescents are more difficult because of the power struggle which is nearly always present between the adolescent and adults in today's society. The war between the generations reaches its peak during this period of the child's development.

It is difficult at times to understand the difference between firmness and domination. Adolescents need firmness. It provides limits without which they feel uncomfortable. If there are no limits, the child keeps reaching to see just how far he can go. Domination means that we try to impose our will upon children. Firmness, on the other hand, expresses our own action. Firmness without domination requires practice and mutual respect. We must respect a child's right to decide what he intends to do.

Grey (cited in Driekers & Grey, 1968), Walton (1974) and Dreikurs (1972) propose that in a democracy, where each member of society has dignity and is entitled to respect himself as an equal to others, neither punishment nor permissiveness is meaningful. Punishment invites

rebellion, opposition, retaliation and permission is resented as condescending and insulting. Participation is the key word in a democracy. In fact, the ability to participate in common efforts, to cooperate in the solution of common problems is the basis of all social living and is characteristic of all healthy and happy individuals. It is an ability essential to human survival and further development.

Adler's (1963) understanding of human psychology rested on these assumptions, and Dreikurs (1972) dedicated himself to working out practical ways of teaching and applying this understanding.

Dreikurs (1974) is an advocate of the Family Council in which every member functions as an equal. In the Family Council, anything that affects family life can be discussed. When there is an open atmosphere, problems can be dealt with before they reach impossible proportions.

Walton (1974) reiterates the premise held by both Dreikurs and Grey (1968) that parents and teachers must understand that adolescent behavior is goal directed, and a misbehaving adolescent is a discouraged adolescent. The four common goals of misbehavior as described by Dreikurs are: (1) attention, (2) power, (3) revenge, and (4) inadequacy.

Parents must learn to recognize the specific goal of misbehavior by attending to several different kinds of clues. These clues involve looking at the child's typical behavior, at his response to correction, and at their own personal reaction to the misbehavior.

Adolescents are scarcely ever aware of the purpose of misbehavior. It is doubly important for the parent to be aware of the four common goals of misbehavior and to be able to recognize behavior directed toward a particular goal. They are then in a position to help the adolescent understand the goal of his misbehavior, stop making the misbehavior

worthwhile to the child, and look for ways to encourage the child.

All over the world great numbers of teachers and parents are at war with adolescents. Such adults do not realize that they make the misbehavior of adolescents useful. The most common goal of misbehaving adolescents is the power goal, and the easiest way to gain a sense of power is to rebel.

Adolescents are extremely sensitive to being placed in a position of inferiority. When we communicate with an adolescent in ways that suggest that his point of view is not important, he feels he is being placed in an inferior position to the adult. Adults must pull out of the power struggle, and have the courage to stop defending their status. The approach suggested by Dreikurs (1974) is that we must sit down with the adolescents, discuss the issues, and decide what can be done about the situation. The adolescent begins to sense that he is being treated with respect, that his point of view is valued and he is not relegated to a position of inferiority. They are much more willing to cooperate with adults under these conditions. The secret for success in such exchanges is simply this: Do not fight, but do not give in. Occasionally such discussions may end with the parties agreeing to disagree. Then they may pick up the discussion at a later date when one or the other may have additional information or a different point of view.

Ginott (1969) also suggests a blueprint for competence to parents who wish to stand, withstand, and understand their teenagers. He describes adolescence as a time of turmoil and turbulance, of stress and storm. The personality of the adolescent is undergoing the required changes: from organization (childhood), through disorganization (adolescence), to reorganization (adulthood). Adolescence is a period of curative

madness, in which every teenager has to remake his personality. He has to free himself from childhood ties with parents, establish new identifications with peers, and find his own identity. It is therefore, a time for uncertainty, self-doubt, and suffering. McCandless (1970) also describes adolescence as a bridge period, a time of shifting from one state to another.

One of Ginott's first suggestions is for parents to refrain from denying the adolescent's perceptions. Parents should not argue with his experience or disown his feelings. It is a parent's responsibility to demonstrate to his teenager fruitful methods of communication and conversation such as listening with attention, repeating the gist of the "opponent's" statement, avoiding criticism and finally stating one's own views.

Ginott further suggests that a parent be his child's advocate. This is not to suggest that parents condone misbehavior, or sanction misconduct. However, regardless of the offense, parents should try to see the extenuating circumstances and to provide support. Parents can provide "emotional first aid" by showing the adolescent that they understand their anger, hurt and/or humiliation by the use of healing dialogue. Strong feelings tend to diminish in intensity and to lose their sharp edges when a sympathetic listener accepts them with understanding. After emotional first aid has been administered, it is often best to psotpone further action. The temptation to teach an instant lesson should be resisted, and immediate intervention may only serve to escalate the conflict.

Criticism should not attack personality attributes or character traits. Anger must be dealt with without insult. This method involves

a four point guideline including: (1) describe what you see, (2) describe what you feel, (3) describe what needs to be done, and (4) never attack the person.

Parents have as their responsibility to set standards and demonstrate values. There is a crucial difference between the old way of imposing restrictions and the new way of setting limits. In the past the adolescent's feelings were often ignored. Restrictions were set amidst anger and argument and in a language that invited resistance. In Ginott's approach, limits are set in a manner that preserves our teenager's self-respect. The limits are neither arbitrary nor capricious. The distinction between feelings and acts is the basis of the new approach to adolescents. Parents are permissive when dealing with feelings and wishes, but strict when dealing with unacceptable behavior. Parents are constantly blamed for the unacceptable behavior of youth and for the troubles that young people appear to be causing society. The Parent Effectiveness Training (PET) program was developed in 1962 by Gordon to stop blaming parents and start training them.

Gordon (1973) is convinced that adolescents do not rebel against parents. They only rebel against certain destructive methods of discipline almost universally employed by parents. The PET program substitutes new methods of resolving conflicts, and has thrown new light on punishment in child-rearing. Many PET parents have proven that punishment can be discarded forever in disciplining children.

Ginott pointed out how parents can talk more therapeutically to a child and avoid damage to his self-esteem. Gordon presentes a more comprehensive philosophy of what it takes to establish and maintain an effective total relationship with a child in any and all circumstances.

The PET approach teaches parents a rather easy-to-learn method of encouraging youth to accept responsibility for finding their own solution to their own problems. This method, similar to Dreikurs' family council idea, is called "active listening." This method involves participative decision making in resolving conflicts. This method to effective parenthood requires a rather basic change in the attitude of most parents toward their children. It takes time to use it in the home, and it requires that parents first learn the skills of nonevaluative listening and honest communication of their own feelings as suggested by Ginott.

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THE DEVELOPMENT OF THE ADOLESCENT SELF-CONCEPT

Mary Ellen Smith

This paper presents information concerning the development and the dynamics of the self-concept of the adolescent.

The definitions of adolescence and self-concept need to be outlined. The term adolescence has been given much attention, perhaps because the total development of the individual is affected during this stage of life. The stage labeled as adolescence can be designated age-wise, "over twelve but under twenty", or psychologically when the child begins to feel less need for the security of the protection and supervision of his family, or physiologically when his maturity physically and hormonally begins to compare with adult maturity, and he becomes socially acceptably mature and responsible (Nicholas, 1973).

Giffin (1971) defines adolescence as a "special form of reality." She further explains by describing the individual adolescent as being often withdrawn, often aggressive (a show-off) and often defiant. Adolescents commonly have body-image problems from their maturing experiences; they are hypochondriacal; they are depressed; they are a jumble of personality variations all in the same body.

Among all of the above mentioned changes during the adolescent stage of an individual's life is the formation and the strengthening of the person's self-concept. The acquiring of the entity of the self-concept involves the differentiation of an individual's personal identity from his total world of awareness. An effective explanation of a person's self is given by Jersild (cited in Grinder, 1973):

> A person's self is the sum total of all that he can call his. The self includes, among other things, a system of ideas attitudes, values and commitments. The self is a person's total subjective environment; it is the distinctive center of experience and significance. The self constitutes a person's inner world as distinguished from the outer world consisting of all other people and things.

The development of the self-concept is nurtured by what one would ideally like to be and how one views himself as performing in relation to other people. The self has in its make-up both concept and feeling (Gallager, 1973).

Therefore, a person's concept of self grows out of his interaction with others and is largely a reflection of the way others view the self. Others are an important influence on the self-concept as people judge others by the individual's behavior, and, in turn, the individual tends to see himself in terms of other's judgments (Heise, 1972). At this level, human behavior becomes purposive. The behavior seeks to fulfill the prophecy (Maltock & Jen, 1974). The self is, therefore, according to Hurlock (1973), a "social phenomena" growing and expanding through the context of interpersonal relationships, the process becoming a major undertaking during adolescence when a child is additionally changing in a variety of ways.

The development of the self-concept is also seen as a learning experience by Evans (1970). The development follows certain stages related to the cognitive development of the adolescent. This stage of cognitive development, outlined by Evans from the theories of Piaget, includes the individual's emergence of more specific thought processes, concept formation, and reasoning abilities than possessed at an earlier stage of

cognitive growth. Utilizing this higher level of cognitive ability, the adolescent learns and formulates personal ideas about himself through observation of and participation in daily interrelationships with others. The impact of the significant others from which he learns (parents, peers, siblings) all feed into the development of the emerging adolescent self (Evans, 1970).

The main attributes of the self that the growing adolescent is defining through his relationship with others include: intellectual adequacy, dependability, physical adequacy (body build, attractiveness or degree of good looks, degree of physical masculinity or femininity) and personality (outgoing or shy). During adolescence these and many other traits, which have already been learned by the individual, are under constant review in light of self acceptance or rejection by the significant others with which he is in constant contact (Gallager, 1973).

The foundation built thus far concerning the organizational and developmental process of the self-concept of the adolescent includes a newly integrated self-concept brought about by the changing attitude of society toward the individual as no longer a child but not yet an adult, his own changing notion of self because of his sudden noticeable physiological differences, and his redefinition of his relationships with his own and the opposite sex. Throughout these changes the individual strives to form a self-concept which can be accepted comfortably and efficiently by himself.

Elkind (1972) describes the adolescent's striving to formulate a self as based on a stage of egocentrism. During this stage the adolescent is developing the cognitive ability of formal operations which permits the young person to construct all of the possibilities of a situation and to

construct contrary-to-fact propositions, and to reason his thoughts and the thoughts of others. The egocentrism is dominant here because, although the individual now is capable of conceptualizing the thoughts of others, he often fails to differentiate between the objects toward which the thoughts of others are directed and those which are the focus of his own concern. Therefore, because the stage of growth designated as adolescence is pervaded by a conscious devleopment of a self, the adolescent assumes, through his awareness of others' thoughts, that other people are as obsessed with his behavior and appearance as he himself is. This belief that others are so preoccupied with the individual's behavior and appearance is the basis of the egocentrism of the adolescent.

This hypothesis of an egocentric adolescent stage further suggests that in social situations the individual anticipates the reactions of others to himself. This is an often unlikely anticipation because the individual is basing his anticipations on the premise that others are as admiring or as critical of him as he is of himself, which is usually not the case in an actual social situation. The adolescent therefore becomes overly critical of his appearance and behavior, modeling himself after those he admires or sees receiving an abundance of attention, and removing himself from those who are critical of his changing attitudes and behavior. Thus builds the basis for the adolescent's reactions to teacher and parent authority of right and wrong, peer force toward the new and different, and the confusion of the self-identity: Who am I really? Where do I belong? How do I decide where I'm going?

As a result of a series of bouts with authority, experimenting with the unknown and the exciting, succeeding, failing, loving, hating, hurting, being hurt, growing physically and mentally, the individual gradually

overcomes the conflict between the reactions he anticipates from others and those which actually occur as he discovers the difference. An integration occurs between expectations and reality, thus the self, which becomes the daily reality, changes, grows, and becomes the foundation for further actions and reactions.

The effect of each group of significant others on each aspect of the self which the individual is attempting to stabilize is criteria for several separate research items. Positive feelings about the adolescent by significant others is a major advantage for the adolescent's struggle toward an integrated, comfortable self (McCandless, 1970; Siegel, 1974).

A good adult model for the adolescent to observe can be one of the most effective tools for the establishment of a healthy self-concept (Nicholas, 1973). Although adults may be shunned by the adolescent at this period of time, the youth is not blind to the daily lives of the significant adults who surround him and enter into his life. The point of confusion between childhood and adulthood must be again emphasized. The adolescent is continually sifting through the facts and the experiences concerning all of the people with whom he is associating, although he has seemingly taken up with the accepting peer group, with no regard for adults.

The adolescent apparently no longer includes the identity which once revolved around home and family but substitutes his peer group. This identity with those of his own age and interests encompasses different dress, lingo, and music--a means by which to separate and sort out childhood from adulthood. The fads and the styles may be shocking and disappointing in the eyes of adults but these extremes are not to be seen as the goals in life for the adolescent. In support of the adolescent the family should not dissolve its intimacy with the adolescent with as much absolution as

the adolescent has apparently separated from family ties. Even though the adolescent approaches family activities with reluctance or refusal, the entire family needs to express its need for the individual's presence. The adolescent may not be certain that he needs to be with his family but he needs to be certain they want him with them.

Giffin (1971) stresses the need for adults to listen to the "confusion of the emotions" of the adolescent, to not forget the inner sensations, desires, and emotions that cause the adolescent behavior and personality variations. The adolescent's physical growth and physiological development unleash powerful impulses within him. As explained by McAllister (1970) and Thompson (1970), the individual can't control the inner development, but he must learn to control for behavior toward which it pushes him. Adults tend to concentrate on the adolescent's behavior and not on recognizing and appreciating his needs. A set of rules to regulate behavior is not needed as much as a set of attitudes with which to approach the individual adolescent while the youth is struggling through this confusing point in life.

The development of a healthy self-concept for the average adolescent is a fragile and difficlut experience which is characterized by continual shifts in emphasis, direction, and expression. The adolescent self can be referred to as a kind of "experimental personality style which may change, 'chameleonlike' with very little notice; depending on the strength of and the interest in current fads" (Gallager, 1973). The adolescent self is not completely formed at a designated age but is in part only expressing in its many changes the resemblances of the adolescent culture around which it is nurtured. This changing and turmoil is packed with sufficient emotional upheaval, but the self that comes from this transition from

childhood to adulthood carries with it some tentative ideas for each individual concerning his assets and liabilities, his goals, and the ways in which the goals will be reached (McCandless, 1970).

Persons involved with the adolescent (parents or people who work with the adolescent) need to keep in mind various aspects of this specific period of development. The adolescent needs to experience a considerable amount of normal changing and growing. Adults often forget or do not realize this normal sequence of development and act and react as if these were symptoms of personality malfunction and disorder.

Adolescence is dually a psychological and a physical growth stage. The "self" we see expressed during adolescence is not unrelated to the adult self which will emerge form it. Good adult models are essential for the adolescent's establishment of constructive self-direction and identity. The adolescent self will continue to develop in the direction it starts with the varied influences of parental and peer values.

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THE SELF-CONCEPT OF THE LEARNING DISABLED ADOLESCENT

Betty Lockett

A survey of the literature concerning the self-concept of the learning disabled adolescent reveals a wealth of material concerning the self-concept, learning disabilities and adolescence, but relatively little of substance concerning the integration of the constructs within the student himself. While there is almost universal acceptance of the fact that the learning disabled adolescent has a poor self-concept, no research studies were found to substantiate this premise. Tests purported to measure self-concept appear to be unreliable and invariable measure factors other than pure self-concept (McCandless, 1970) and none were found which specifically focused on the learning disability population. Therefore, information must be gleaned from the literature concerning self-concept, adolescence and learning disabilities and conclusions drawn without benefit of specific research concerning the topic.

Since it was impossible to survey all of the literature in these interrelated areas, this paper is necessarily selective in what it presents and endeavors to define self-concept, substantiate the fact that LD adolescents do have negative self-concept, indicate reasons for this and show the interrelationship between self-concept, adolescence as a period of development, and academic achievement.

Definitions of self-concept abound in the literature, some global in approach and others providing insight into the different aspects of self-concept. Among those investigated were Labenne's (1969) definition which is as follows:

> Self-concept, as it is generally used in the professional literature is a group of feelings and cognitive processes which are inferred from observed or manifest behavior. By way of a formal definition, self-concept is the person's total appraisal of his appearance, background and origins, abilities and resources, attitudes and feelings which culminate as a directing force in behavior. We here hold that a person's conscious awareness, what he thinks and feels, is that which primarily guides, controls and regulates his performance and action (p.10).

Burke and Sellin (1972) quote Heber's definition of self-concept (1964) as follows:

> Central to a number of contemporary theories of personality is a global concept which, in general, refers to the sum total of all the characteristics a person attributes to himself, and the positive and negative values he attaches to these characteristics (p. 126-127).

Grossman (1971) defines self-concept as:

> . . . a child's specific view of his world and himself in relation to it. The psychological self refers then to the child's evaluation of his own psychological place within his family, his school and his community. In this sense the self acts as an intermediary between the child's environment and his behavior (p. 248-249).

In Perceiving, Behaving, Becoming, Combs (1962) says:

> The self-concept . . . is learned. People learn who they are from the ways in which they have been treated by those who surround them in the process of their growing up. This is . . . called learning about self from the mirror of other people. People discover their self-concepts from the kinds of experience they have had with life--not from telling, but from experience. People develop feelings that they are liked, wanted, acceptable, and able from having been liked, wanted, accepted and from having been successful. One learns that he is these things, not from being told so but only through the experience of being treated as though he were so. Here is the key to what must be done to produce more adequate people (p. 84).

From all indications, the self-concept, whether positive or negative, remains reasonably constant throughout the childhood years; however, with the advent of puberty, the child is forced to develop a new concept of himself.

Mussen, Conger and Kagen (1969) report that:

> . . . in puberty and adolescence all sameness and continuities relied on earlier are more or less questioned again, because of a rapidity of body growth which equals that of early childhood and because of the new addition of genital maturity (p. 690).

As quoted in the same source:

> Erickson (cited in Mussen et al., 1969) notes (that) the rapidly changing adolescent, confronted with this physiological revolution within himself and with the varied intellectual, social and vocational demands of adulthood that lie directly ahead, is concerned with how he appears in the eyes of others, compared with how he feels he actually is, and with the question of how to connect the roles and skills cultivated earlier with the demands of tomorrow (p. 690).

McCandless (1970) reports that:

> . . . the emergence of a new drive at pubescence is a developmental landmark that has tremendous effect upon the adolescent. First, it forces a dramatic change in the person's notion of himself because of his sudden physiological differences. Second, the new drive, for psycho-sexual reasons, makes the adolescent redefine his relationships with his own and the opposite sex. Third, because he is perceived as postpubescent, society shifts its attitudes toward him. He can no longer be regarded and treated as a child but he has not yet earned nor will he soon be granted adult status (p. 440).

McCandless goes on to state that the self-concept is exceptionally complex and includes three major components: structure, function and quality. His conceptual structure of these areas reveals that he views the structure of the self-concept to include whether it is rigid or flexible, congruent (fits together harmoniously, i.e. true and ideal self not seriously at variance with one another), simple or complex, and broad or narrow.

Among the functions of the self-concept, McCandless lists self-evaluation, prediction of success or failure in various activities, various life functions (survival, obtaining acceptance, self-enhancement, achieving personal competence and self-actualization) and finally whether the self-concept is inner or outer determined (i.e. instigated and rewarded primarily by his own value and reward system or a reaction to external investigations and rewards).

As qualities of the self-concept, he includes approving or disapproving (self-esteem) and self-acceptance or self-rejection.

Conversations with Flanagan (1970) and Owen (1973) reveal their belief that adolescents with learning disabilities frequently follow a pattern of delayed physical development. In turn, the delay in the onset of puberty and its parallel development of emotional maturity, as well as social and abstract thinking skills aggravate the adolescent's adjustment problems by making him a child while his peers are in the process of becoming adults. Flanagan (1974) indicated that his experience shows LD adolescents to be 2-3 years delayed in emotional development until mid or late adolescence.

Frequently, the high school student with a learning disability thus finds himself a social misfit, unable to compete in physical activities on a par with his more developed classmates, in need of abstract thinking and basic academic skills as yet undeveloped, and devoid of the emotional maturity he needs to cope with his deficits.

All too often the result is an increase in anxiety, frustration, and anger. The student not only feels, but actually is inadequate to meet the demands placed upon him. A crisis in self-esteem and self-concept follow which is frequently one of the factors leading to depression and/or other emotional illnesses.

Supportive evidence of these observations is found by Kronick (1972), who in writing of the LD adolescent, alludes to "their low self-esteem which includes giving up and a what-difference-does-it-make attitude; their short-sightedness, which renders only the specious present important; and their poor social skills, which make friendships shallow and impermanent on the one hand and provoke antagonism and ostracism on the other. . ."(p. 273).

Gordon (1970) refers to "young people already suffering from a poor

self-image, . . . (who) feel inadequate (and) invite and provoke criticism to guarantee, in a sense, that everyone will see them as they see themselves" (p. 45).

Siegel (1974) discusses three conditions which he believes lead to the poor self-esteem of the learning disabled adolescent. First, the student's inability to achieve satisfaction and success through his perceptual processes; secondly, his awareness that he is handicapped and that most of his peers are not and finally, the reactions of others to him.

Siegel goes on to say:

> . . . his feelings of not fitting in with the physical-sensory world easily, his painful awareness that others all around him are superior performers, his frequent encounters with criticism and rejection which grew out of his struggle to survive perceptually--all are factors that, though distant in origin, may nevertheless have had a cumulative effect in shaping long-lasting feelings of inadequacy (p. 41).

Thompson (1970) states that self respect is a necessary condition for happiness. She concludes that because the learning disabled adolescent seldom says or does anything to meet the impossible standards set for him, that he is effectively denied the ingredients he needs to establish a positive self-concept. "At every turn he is told implicitly and explicitly that he does not meet the standard and is not likeable for his own sake" (p. 126).

Giffin (1971) points out that:

> . . . the child is faced with the disabling factors of his handicap, and added to all of this, is the impact of adolescence is a special form of reality, and. . . that is the simplest definition there is . . . . Adolescents have body-image problems, they are hypochondriacal; they are depressed; and they are gay. . . mercurial, variable, variants of personality . . . withdrawn, aggressive and defiant. . ." (p. 29).

Much of the research that is available on self-concept of the handicapped has focused on the educable mentally retarded population. While

not absolute by any means, it is probably a reasonably safe assumption that the same results would be obtained if the studies were replicated using learning disabled adolescents. Brookover et al. (cited in Burke & Sellin, 1972) found that "the student's self-concept of academic ability in turn functions to limit the level of academic achievement attempted" (p. 127).

Richmond and Dalton (1973) found that:

> . . . educable pupils viewed by their teachers as high academically have a correspondingly high self image in most situations. These results support the previously reported findings of Mann, Beaher, and Jacobson (1969) that the self image of the retarded child is intricately linked to his academic success (p. 182).

Lawrence and Winschel (1973) also found "evidence of a positive relationship between self-concept and achievement with educable children" (p. 317).

In a final perusal of the available evidence of the relationship between self-concept and academic achievement, the "Phil" tape played at the GACLD conference in February, 1974 must be noted. Phil speaks movingly of his teacher's considering him dumb as well as of the embarrassing red x's and being called out of his classroom for special tutoring. He speaks of teachers who don't understand his problem and think of him as mentally retarded. Surely these experiences played heavily in the development of this young man's self-concept for as we have recorded, Combs and others view the development of self-concept as partly a "mirroring" process whereby we believe we are what others think us to be.

In summary, the weight of the available evidence leads to certain conclusions about the self-concept of the learning disabled adolescent, although there is not, at present, statistical evidence to support them. The research studies that are available relate to the self-concept of the educable mentally retarded and can only be projected as probably similar to results

which would be obtained if such studies were done with the learning disabled population.

First of all, there is a concensus among those concerned with the LD adolescent that he does have a negative self-concept. There appear to be a variety of reasons given as the cause of this phenomenon. First of all, many learning disability students enter their teen age years with poor self-concepts. Secondly, they arrive with inadequate basic academic skills--skills needed to accomplish high school work. Thirdly, a majority appear to experience delayed physical, social, emotional and conceptual development which effectively renders them inadequate to meet the demands placed upon them during the high school years. And finally, the poor self-concept and its interrelated facets further limit the already lowered potential for academic achievement. All factors combine to keep the adolescent with learning disabilities on a "merry-go-round" which leads to nowhere--to further erode his feelings of self-esteem and leave him with a self-concept which will, in all likelihood, be inadequate to serve him well in his adult life.

As Gordon (1970) says, "It is not the handicap itself that will limit our neurologically handicapped adolescents, but it is their attitude about themselves that will determine about themselves whether they will go ahead successfully or not" (p. 51).

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GRIEF REACTION TO HANDICAP
BY CHILDREN AND ADOLESCENTS

Mary Robertson

There is an observable phenomenon which occurs in children, usually around the age of preadolescence or adolescence, which demands the attention and understanding of parents and any professionals (teachers, counselors, etc.) who may be involved with the educational and social adaptation of the child. The phenomenon has occurred with such frequency in our particular school situation (The Atlanta Speech School) that it was felt to be of sufficient importance to invite our psychiatric consultant, Dr. W. Swanson Millians, to meet with our staff for the purpose of discussing the problems. It was he who identified the problem for us as being a "grief reaction" which begins when a child suddenly becomes aware of the reality or "fact" of his handicap, the strong likelihood that it will not disappear, and the implications this handicap may have for him in terms of future school situations, vocational opportunities, and--primary in the child's mind at the time--accepting the fact and dealing with it in terms of his own ego development and self-concept.

For purposes of clarification since the term "handicapped" is being used, the American Public Health Association has defined a handicapped child as "considered to be handicapped if he cannot within limits play, learn, work, or do the things other children can do: if he is hindered in achieving his full physical, mental, and social potentialities. Regardless of the chief manifestation, physical, emotional, and social components are all factors at one time or another and in varying degrees in most handicapping

conditions of childhood."

In general the literature agrees that the emotional disorders seen in handicapped children are no different in manifestation than those found in non-handicapped children, though there are variations and special problems (Freeman, 1967). Young people with handicaps have "an increased vulnerability to emotional problems because of the complex interaction of themselves, their handicaps, and their environment" (Millians, 1972). The most important variable seems to be parental feelings, attitudes, defenses, and family interactions. This seems to determine the kinds of problems the child will demonstrate in the future, if any.

In describing the grief reaction the young person experiences in accepting himself as a less-than-perfect individual, Dr. Millians has drawn an analogy between the grief reaction parents (particularly the mother) experience when they must face the death of a child or the fact of having a defective child.

The psychological preparation for a new child during pregnancy normally involves the wish for a perfect child and the fear of a damaged child. These preparations or changes, often subtle, appear gradually over a period of time, and are best seen in the interacting development of mutuality of mother and child (Erickson, 1950). "The mother's anticipation of the baby is in many ways like adolescent turmoil because the adult psychic structure is gradually prepared for the birth of a new individual and the crystalization of a new unfolding within the self" (Solnit, 1961, p. 524).

However, this preparatory and adaptive process is abruptly interrupted by the birth of a handicapped child. The mother is faced with a two-fold dilemma--facing the sudden loss of the baby that was expected and the sudden birth of a feared, threatening, and anger-evoking child. This can be

overwhelming.

Consideration should be given at this point to the importance of the mourning process in human development. Grief (or mourning) is "the characteristic response to the loss of a valued object, be it a loved person, a cherished possession, job, status, home, ideal, a part of the body, etc. Uncomplicated grief runs a consistent course, modified mainly by the abruptness of the loss, the nature of the preparation for the event, and the significance for the survivor of the lost object" (Solnit, 1961, p. 526).

In the mother's mourning reaction these disappointed, highly charged longings for the normal child may be recalled, intensely felt, and gradually discharged in order to reduce the impact of the loss of the expected loved child. This process requires time and repetition. The mourning process makes it possible to progress from the initial phase of numbness and disbelief to the dawning awareness of a feeling of loss to the last phase of the grief reaction in which intense re-experiencing of memories and expectations gradually reduce the pain of the wish for the idealized child.

Having traced the mourning process as it occurs in parents and realizing that the family of the handicapped child is crucial in determining the kind of adaptation the child will make when he faces the reality of his own handicap, let's take a look at the manifest reactions of a young boy.

> Bill (age 12 1/2) was a friendly, extroverted youngster with severe problems in dyslexia who had been receiving individualized reading instruction in a school for LD children for the past two years. He had entered the school as a virtual non-reader with accompanying problems of extreme hyperactivity, aggressiveness, and impulse control.
>
> The parents, though obviously aware of the problem, were still in the stage of denial and projected some of their anger on the school as they worked through accepting the reality of the handicaps and what it might portend for the future. Being loving and caring parents, however, their acceptance of the problem led to their being supportive of the school and the child

in every way which should be a great plus-factor in helping the child make his adjustment.

Bill's hyperactivity was brought under control with the help of a neurologist who prescribed Ritalin. His aggressive behavior diminished as it was channeled into a highly competitive attitude in school work and sports. Bill was large for his age, an extremely good athlete, and achieved much recognition both in and out of school for his prowess as a basketball player. Bill was chosen as a member of the All-Star Team in his league. He was a very popular and unquestioned leader among the other children. His outgoing personality and fun-loving attitude made him seem to be well-adjusted and secure.

However, one morning before the school day had even begun, it was obvious that Bill was greatly disturbed. His old anger, aggressiveness and even fears were spilling over into his contacts with his classmates and directed toward the school. When asked what the problem was, he stated that he did not want to go to his next class, it was boring and not helping him in any way. As the day progressed, Bill's teachers continued to get vague and diffuse reasons for his emotional outbursts. Finally, toward the end of the day, he revealed that he had been with friends from his former school the night before and as they talked he began to realize that he could not express himself as well as they and that he would have great difficulty competing with them and being accepted by them, if he returned to his regular school situation next year. This frustration originally centered on his reading, the area in which he was experiencing the greatest difficulty, but generalized to an awareness that this handicap set him apart from others and would have to be contended with in future years.

His old self-concept was dying and he was having to face the new person who, though possessing many strengths, was a less-than-perfect human being.

Adolescence, beginning with preadolescence, is the most vulnerable time in the life of a handicapped child other than very early childhood (Millians, 1970; Freeman, 1967). If there is one single thing to remember about adolescents, it is that they are overconcerned with their personalities (Gallagher, 1967). It is not until adolescence that the child has the intellectual equipment to appreciate the consequences of his handicap, both in the present and in the future. It is mandatory that the child work through his own grief reaction over the loss of a normally functioning body. Many parents of handicapped children have much difficulty at this time as the adolescent's grief reaction reawakens many of their own feelings (Millian,

1970).

Melvin Lewis (1971) has said that somewhere between 10 and 15 years of age the child acquires the grasp of the meaning of mortality. His reaction to death at this time is influenced more by his emotional struggles than by his intellectual capacity. An important determinant of the child's reaction to death is the reaction of those around him. The experience fosters depression, despair, anxiety, and anger. The range of reaction is great. Each child is an individual, and a myriad of variables influence the ultimate behavior of the child, his parents, and the helping persons around him. It is here that the child needs to resolve the distinction between "death" or the loss of the wished-for self and the acceptance of the real self.

The mourning process must follow its course with repetitive occurrence and gradual diminition of trauma until it resolves itself into bringing the real and ideal concepts closer together. "Difficult as it is, this gap can be closed" (Hurlock, 1973, p.338).

It is hoped that an awareness and some understanding of the theory of the mourning process or grief reaction as it occurs first in parents at the birth of a handicapped child and later in the child as he tries to integrate his aspirations with reality, and the mutuality of the process as it occurs at specified times in both parents and children will lead to more supportive measures in dealing with both children and parents.

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COGNITIVE DEVELOPMENT AND COMMUNICATION PATTERNS AMONG ADOLESCENTS

Gail V. Goodwin

> "When I was a boy of fourteen, my father was so ignorant I could hardly stand to have the old man around--but when I got to be twenty-one, I was astonished at how much the old man had learned in seven years."--
> Mark Twain

The adolescent lives in a period of transformation. He is engaged in the process of reworking and reintegrating what has gone on before and orienting himself toward the future and adulthood. Rapid physical development is accompanied by cognitive development which allows the adolescent to introspect and gain meaning from his changing status.

With his newly acquired ability to think on the formal operational level as described by Piaget (1969), the adolescent begins to communicate in new ways. His modes of communication as well as the content of his communication reveal his new cognitive abilities in action.

The adolescent's new cognitive abilities are best described in the context of Piaget's four-staged schema of cognitive development. The first stage described by Piaget is called the sensory-motor period and corresponds roughly to the ages 0-2 years. At this stage, the child begins to understand objects. He experiences objects in different modalities (visually, tactilely etc.) and he begins to have a sensorimotor conception of space and time. The egocentrism of this stage is characterized by the child's actions and body being in the center of the universe.

In the second stage described by Piaget, children from the ages 2-7

begin to acquire language and produce complete sentences. In this pre-operational stage, as it is called, children believe that everyone understands their symbols the way they do. They also believe that their perspective is the same as others. Additionally they fail to differentiate between fantasy and reality.

In the third stage of Piaget's theory of mental development, children from the ages 7-11 enter a period of concrete operations. Reasoning at this stage is never independent of the concrete. However, the child can do in his head some procedures directly related to objects or to perceptive events. The child begins to classify, serialize, recognize one-to-one correspondence, deal with numbers, and understand spatial relations. In what has now become a classic experiment, concrete operational children could watch water being poured from a glass of one shape into a glass of another shape and conclude that the second glass was holding the same amount of water as had been in the first glass. Children in the pre-operational stage would see the water at a different level in the second glass and declare there was a different amount of water in the second glass.

In the fourth stage of mental development, from the age of 11 or 12 to 15, the child enters into the period of formal operations--and adolescence. Unlike the previous stage, children in this period begin to manipulate ideas in themselves not just objects. An adolescent could handle the verbally-presented problem: if A is bigger than B and B is bigger than C, then how does A relate to C? A younger child would need blocks to solve that problem.

The adolescent has the ability to introspect--to think about his own thoughts. He can construct ideals and reason realistically about the future. He begins to understand metaphors and can reason contrary to

fact. If you were to ask an adolescent to "assume coal is white" he could do so. A younger child in the concrete operational period would more likely answer, "but coal is black!"

Formal operations allow the adolescent to construct all possibilities in a system and to conceptualize his own thought. He can hypothesize and deal with the logic of propositions rather than the logic of classes and relationships alone. On the belief that the power of combination in the handling of objects parallels the ability to handle combinations of ideas, Piaget gave children a number of red, blue and green counters and asked them to build up all the possible color combinations two by two, three by three, four by four. The adolescent at the level of propositional operations could do the combinations. The younger child could not complete the system (Piaget, 1969).

In another study, Inhelder and Piaget (1958) presented children and adolescents with a group of rods varying in length and made of different metal. The task was to determine the effects of length and type of metal on the flexibility of the rods. Since the problem requires that two or more qualities or dimensions be entertained at the same time and since imaginary possibilities must be dealt with in this problem, the child operating on the concrete level had difficulty. The adolescent, on the other hand, could consider all of the different possibilities of length and metal and could test and manipulate hypotheses and compare them with reality.

Piaget suggests that a very important cognitive development in the adolescent years is the ability to synthesize the two forms of reversibility found in concrete operations--reversibility by reciprocity as in the case of relationships (if A is on the left of B then B is on the right of

A) and reversibility by negation (+A-A=0). Understanding these systems of reversibility, the adolescent can deal with new concepts such as the relation between action and reaction and proportion.

Piaget's theories of cognitive development have been studied and substantiated by other researchers. Peel (cited in Elkind, 1970) reported a study in which children and adolescents were read a passage about Stonehenge and then asked questions about it. One question had to do with whether Stonehenge was a place for religious worship or a fort. The young children (ages 7-10) would answer with flat statements as if they were given a fact. If they were given evidence which suggested their statements were wrong, the children would change the evidence enough to make it conform with their statements. Adolescents, on the other hand, tended to phrase their answers in more probabilistic terms and could support their answers with material they read in the passage. (This study might be criticized for failing to account for school training in the older children's approach to the problem.)

Bruner (cited in Britton, 1966) also has conducted studies which substantiate the sequential development of cognitive ability described in Piaget's theories. In one study, boys and girls aged 6-11 were shown a set of 42 pictures. The children were asked to pick out the picture that the examiner was thinking of. The six-year olds asked specific questions such as, "Is it the hammer," while the eleven-year olds asked constraint questions such as "Is it a toy?" The eight year olds were mixed in the type of questions they asked.

The adolescent does not let his newly acquired thought processes lie dormant inside his head only to be used in school or for specified academic pursuit. Rather, the adolescent's whole social being is affected by his

new mental abilities. In particular, the adolescent's communication patterns begin to change and become distinctive.

According to Piaget, communication reflects the maturity of thought processes and experiences which allow a person to integrate relations external to his own sphere of influence--that is, a person's ability to relate experiences from the perspective of others. A young child would believe everyone thinks the same as he does and about the same things he does. The child will speak in the presence of others but without concern that they hear (Piaget calls this a "collective monologue"). A child would also speak on whatever most interested him without regard to its appropriateness in the particular situation he found himself.

In adolescence, the ability to take the perspective of others and communicate meaningfully has begun to develop. The adolescent is more aware of the reactions of others and chooses topics of conversation appropriate to the situaion in which he finds himself. However, the young adolescent also uses his new ability to establish exclusiveness. The adolescent denies reciprocity (perspective of others) through his own personal limitations and needs (Cohen, 1971).

One of the adolescent's limitations which affects his patterns of communication is his inability to differentiate between real others and imaginary others--the imaginary audience described by Elkind (1967). Apparently as the adolescent begins to use his newly acquired mental abilities and look into himself, he believes that others are as concerned about his thoughts (and appearnace) as he is. He fails, too, to realize that others have their own dreams with equal claim on the actual. In general, the young adolescent fails to distinguish subjective features from objective ones.

The young adolescent is also limited by the fact that moral and ego development as described by Kohlberg and Loevinger (cited in Breger, 1974) lag behind intellectual development. Only as he progresses through these higher stages of development, will the adolescent begin to shed some of his egocentrism of the early period, and begin to communicate on a more realistic basis.

Although the adolescent often fails to achieve reciprocity--particularly with adults--in his communication, he does have an urgent need to communicate. Through his new cognitive abilities, the adolescent is able to project himself into a future role. He is able to see the world and himself in more possible ways. Grand plans and private fantasies are written in diaries and shared with like-minded friends. Inhelder and Piaget (1958) reported a study on the evening reveries of adolescents which showed that the most normal students confessed to wild fantasies. One adolescent had written a secret novel.

Secrecy is an integral part of the adolescent experience. The novel mentioned above was secret. Diaries are kept in drawers under lock and key. Secrecy is also evident in the interactions between peers. Two close friends may communicate in pig latin or sparrow language or another secret system to keep others from understanding. Two seventh grade boys (12 years old) in my class speak a form of pig latin amazingly fluently when they wish to exclude me from their conversations.

The slang or argot of adolescence is another way this age group uses language to set themselves apart. Much of this slang is oriented toward hetero-sexual relations--a girl may be a "solid sender" or a "spook." A guy may be a "dog face" or a "swooney." Additionally, slang terms seem to cluster around forbidden topics--drugs, drug taking, sexual achievements,

and law breaking.

The adolescent manipulation of language for secrecy and exclusion is not only designed to exclude adults. My students speaking their pig latin or two girls engaging in "trick talk" (talking without looking at each other) are forming groups which exclude their own peers. Similarly, cliques (and gangs) so common during the adolescent period, are characterized by their lingua franca. Adolescents wishing to beling to a group may use the jargon of that group in an effort to obtain entry to it.

Another, but more subtle, way the adolescent uses language for exclusion is when he says one thing while thinking another. The adolescent, now aware of his own thoughts and more aware of others' thoughts and wishes, has learned that his thoughts are secret. He can be deceptive and he can disguise his own personal involvement.

Finally, in trying to find his role and self identity, the adolescent may feel like a foreigner in this world. He may find it possible to communicate only with those who can speak his native intellectual language or idea. Cliques form in which members (usually one sex) serve as sounding boards to each other for the development of ideas (Douvan & Adelson, cited in Lambert, Rothschild, Altland & Green, 1972). In his group, the adolescent expresses his ideas and determines their effects on others. He searches the meaning in what his peers are saying and evaluates the significance of ideas left said or unsaid. Sex taboos, religion, and morality are discussed and all mutual problems regardless of intimacy and detail are brought up in the trusted group. Undoubtedly, too, as Piaget believes, "spontaneous feeling between one person and another grow up from the increasingly rich exchange of values" (Piaget, 1969) that occur in these discussions.

The adolescent's new ability to think abstractly about the world unleashes a need to talk and communicate--within his clique, for hours on the telephone with a close friend, or endlessly into the night at a slumber party. The adolescent uses his new awareness and his facility to express himself for self exploration, for sharing ideas and problems with his friends, and for excluding others (McCandless, 1970).

Undoubtedly, the adolescent's verbal communication helps develop further his cognitive abilities. In fact, communication serves an important role in the adolescent's total development process. To this effect, Erikson (1959) stated that verbal commitment through speech "is strategic among the experiences which support or fail to support a sound ego development" (p. 115).

I would conclude, then, from my investigation, that the child who is handicapped in his use of spoken language misses an important part of the adolescent experience. He may suffer from missing whatever role interactive communication can play in his future identity development, not to mention the role communication serves in dealing with his affective needs during this changing time of life.

Much research has been done in the area of cognitive development including many cross cultural studies which substantiate the universality of the order of cognitive development. More studies, however, need to be done in the area of the role adolescent communication plays in the adolescent's total development and how a learning disability may alter this development.

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PEER GROUP EFFECT ON ADOLESCENT DEVELOPMENT

Marvelle M. White

The pressures emerging from adjusting and conforming to the norm of societal demands vary from one adolescent to another. Doubts, anxieties and strong resentments are often experienced during the process of adapting to a changing self psychologically and physiologically and meeting rapidly changing demands of society. The sensitivity of the adolescent in revelaing his inner feelings during this stage of development arouses a desire for relationships which are mutually interactive and emotionally interdependent. As the mid-adolescent years are entered, the need for positive peer relationships is strengthened and structural changes in the nature of peer groups are noted. Emphasis in this report will center on the scope of influence of peer groups during this age.

Definitions

Consideration of the relative importance of peer groups in the lives of adolescents necessitates an overview of varied definitive limits set by several leading authorities in the field of psychological development of adolescents. It is hoped this will alleviate some of the confusion concerning the positive and negative influences which are exerted by peers.

Conger (1973) believes that the terms 'adolescent peer group' or 'peer culture' oversimplify the nature of their influence and thus do not lend sufficient understanding to their importance. In reality, the adolescent is involved, in complex ways, with overlapping peer

groups that vary in size and degree of intimacy. These groups and their functions change in nature as the adolescent advances in age.

One may consider the peer group as the prime source of experience. It is an arbitrator and dispenser of group acceptance or rejection. From it, the adolescent determines what is acceptable or not acceptable (Allen & Eicher, 1973).

Lambert, Rothchild, Atland & Green (1972) state that the peer group is considered a subculture of the adolescent's own design which envelopes values and establishes status criteria which make it distinct from the adult world.

A culture operates within the adolescent age group which is similar to that of adult societies but which clearly manifests itself in the emotional feelings, desire to conform, belongingness and need for social approval. It has its own methods of developing values, standards, purposes and self protection (Garrison, 1962).

During the middle years of adolescence the 'peer culture' evolves and is the sum total of spontaneous social manifestation among age mates. At this stage peer values are more influential in producing behavior than adult values (Cole & Hall, 1970).

Kugelmass (1973) presents the definition of peer culture as the "summon bonum" of social manisfestations at the mid-adolescent age when peer values have greater effect than adult values. It does more to bring about normal social growth than the effect of parents and teachers combined.

From McCandless and Evans (1973) comes the view that the peer group is considered a primary social group (involvement of family, neighbors, close friend and classmates). It is central for development of the human being and rivals, if not equals, the influence of the family.

These definitions allow for the establishment of the premise that during the mid-adolescent years, a social group within his own age realm is within the boundary of developmental needs of the adolescent.

Role of the Peer Group

The role of the peer group assumes particular importance at this age because at no other stage of development is the individual's sense of identity so fluid (Conger, 1973). No longer a child, but not yet accepted as an adult the adolescent has very few guidelines to meet society's demands for social independence, vocational competence, responsibility as a citizen, marriage and family, and a philosophy of life with which he can live and work. This organized group excludes adults to liberate youth from their controls and relieves the loss of anchorage to the home. The peer group in actuality offers opportunities for youth to learn new social roles, facilitates development of identity, encourages discovery about oneself and others, contributes to a feeling of belonging and status, and provides an environment conducive to learning to communicate and live with other people. Development of each of these factors is vital in the total development of adolescents as they approach the world of adulthood.

Kuglemass (1973) emphasizes that the most significant personality change during adolescence is from the diminished status an individual derives from dependence on parents to a corresponding increase in status earned in his own right. An intrinsic self-esteem independent of his status in the peer group is achieved through acceptance by the peer group as he grows in the ability to subordinate himself to group

interests and hence gain group approval. Failure in this may effect other facets of his adjustment (Lambert et al., 1972).

While the rapid personality and social changes occur during this stage, it is imperative that the adult world be ever cognizant of adolescents' uncertainty of themselves. One function of the peer group is to defend the adolescent from this uncertainty through security of his membership in a group. It is through this membership that he acquires a certain status from which evolves recognition of his identity separate from that of child of the family.

To the adult the social behavior displayed may seem silly, awkward or merely wasteful of time that might be used otherwise. Adolescent's social skills at this stage are underdeveloped and awkward, but this forms a primary reason for the kind of experiences they crave. Through such experiences adolescents may acquire poise and learn to adjust themsleves to demands of society first exemplified through demands of peer groups (Cole & Hall, 1970).

Most behavioral scientists agree that the sense of belonging and status which are essential to successful development are worked out in one's own world. With the adolescent this is done among his peers (Thornburg, 1973). The youngster who does not belong to a crowd is miserable. Few are self-reliant enough to stand alone and achieve any degree of happiness (Cole & Hall, 1970). While adolescence is generally a time of intense sociability, it is often a time of intense loneliness. Merely being with a crowd does not solve the problem, for the adolescent can feel alone in the midst of a crowd. Thus being accepted by his peers or belonging to a group makes a great difference in the life of the adolescent (Conger, 1973).

Sometimes peer relationships may serve no other purpose than that of a sounding board. They may also provide a two-way street for exchange of ideas, thoughts, and feelings. The never-ending conversations provide

practice sessions in skills needed for social interaction among well-adjusted adults. The frequent lack of verbal facility at this age possibly reflects limited conversation at home and a fear of ridicule and rejection for verbal ineptitude. The White House Conference in 1950 concluded that not only are social skills developed by lengthy adolescent conversations, but also greater insight into how others think and feel (Lambert et al., 1972).

Although few parents are enthusiastic about the practice, it is likely that telephone conversations serve many of the same purposes as the face to face talk sessions so prevalent in peer groupings. Here the learning process is taking place as the adolsecent expresses ideas with a certain anonymity (one's face does not betray one). Many young people indulge in this practice with peers in an almost therapeutic sense as they confide struggles and fears into the anonymous mouthpiece (McCandless, 1970; Lambert et al., 1972).

A final consideration may be the role peer groups play as young people find themselves forced to experiment with a number of different relationships in the transition from primary same-sex friendships to development of heterosexual friendships (Wattenburg, 1973). At the same time associations with individuals of the same sex continue, though somewhat less in the foreground (Conger, 1973).

The peer group may be the major source of sex education since peers will often provide information on topics avoided by adults. Contemporaries can help the adolescent prepare to make decisions about premarital sexual activities and marriage itself. In the peer group settings, young people can try out psychosexual and sociosexual roles. Evolving from this is the development of individual sexual behaviors which serve as guidelines for future behavior (Lambert et al., 1972).

Conformity to the Peer Group

Our culture sets a pattern for expected adolescent social behavior. Although parents often set the stage for this behavior, it is the influence of peer group associations which produce the observable effect. As groups of adolescents move into their own subculture, patterns may vary from that of the larger society (Bandura cited in Thornburg, 1970). Having left the world of childhood, but not fully admitted to the world of adults, adolescents feel the need to create an interim culture of thier own. It is important to them that whatever form their culture takes, it must be ambiguously different from the world of adults if it is to be effective and serve the needs of the adolescent (Conger, 1973).

For a goup to maintain its distinctiveness, a certain degree of conformity--yielding to pressure groups--is necessary. While this is largely decried by parents and the adult world who profess to strongly urge independent judgment and personal autonomy, they, too, are observed by the adolescents as conforming in the societal world in which they are identified. The point is that conformity per se is not necessarily an ugly force but the collective support of accepted norms that provides a group with its identity (McCandless and Evans, 1973). Because of the heightened importance of the peer group during adolescence, motivation for conformity to the values, customs and fads of the group increases.

The adolescent may deny or fail to recognize what at times appears to be an excessive conformity to peer pressures. To them it may be simply a bold exercise in individuality. Contrasting views of the observer and participant may explain this paradox (Conger, 1973).

There are some individual adolescents who either through choice or rejection are isolates. These adolescents have no opportunity to discover

the strength conformity may give in a social situation. Unfortunately, the unpopular adolescent is likely to be caught in a vicious circle. If he is already emotionally troubled, self-preoccupied, or lacking a strong self-concept, he is likely to meet with rejection of his peers. This in turn denies him the opportunity to learn from the peer group and further undermines his self-confidence and sense of social isolation (Conger, 1973). The total nonconformer, whether by choice or rejection, is simply cast out. As such, he has little opportunity to experience the relationship that his fellow adolescents have and can only watch from a distance. Both teachers and parents should feel concern about those experiencing peer rejection on the basis that it interferes with social development, classroom learning and mental health (McCandless and Evans, 1973).

Parents Versus Peers

Despite the major importance of peer groups on personal development, there is a good deal of evidence to support the fact that parental influence is still of great importance (Muma, 1971). The potent force of parents is manifested in the need for adult love and support throughout the maturing years. This strengthens the adolescents' learning to derive satisfaction from intangibles such as accomplishment, integrity, service and self-respect while revering human life (Kugelmass, 1973).

It is important to note that the common assertion that parental and peer values are incompatible and that a sharp decline in parental influence is inevitable is not a proven fact. Rather, peer influence is more likely to be predominant in matters such as music, entertainment, fashions, language and patterns of same and/or opposite sex peer interaction. Parental influence dominates in areas such as moral and social values and understanding the adult world (Conger, 1973). The family continues to be a

primary socializing agent although its authority must field at times to competing socializing forces such as the peer group as well as the adolescent's growing need for independence (Lambert et al., 1972).

Parents must learn to maintain a consistent attitude during the adolescent development of their child. A youth needs to feel that in his family there are firm standards and limits which remain in spite of the pressures of the peer groups. Wholesome family standards of behavior will constitute positive guides to him throughout maturation. The adolescent needs to feel that his parents will support him in spite of his failures in social and sexual adjustment (Kugelmass, 1973).

Recent studies determined that parental influence during the mid-adolescent years was found to be greatest where there was the highest "parent-adolescent affect" or quality of parent-child realtionship as measured by parental interest and understanding, willingness to be helpful and amount of shared family activity. Furthermore, adolescents with high parent-adolescent affect were significantly less likely than those with low affect to feel a need to differentiate between the influence of their parents and peer groups (Conger, 1973).

Significance of Peer Group Acceptance

Adults who deal with young people need to appreciate fully the significance of peer groups in the lives of teenagers. The powerful group pressures present one opportunity for the parent or teacher who knows how to give sympathetic guidance to assist groups to help their members.

In peer groups, young people have experiences which can leave a lifelong imprint upon their character and personality. The significant fact may be isolation or rejection from the group, a feeling of an insecure standing within a group, or the eye opening discovery that they are

likeable (Wattenburg, 1973). It is imperative to be ever aware that these experiences occur when childhood has been renounced but acceptance into the adult world is yet to come. All of this is occuring at a time the adolescent is struggling to discover, interpret and control a self that is rapidly changing physiologically and psychologically.

This confusion is enhanced or alleviated by the complex phenomenon of the social rejection or acceptance of the peer group. Adolescents at this stage are tremendously sensitive to social stimuli for no problem seems so important as establishing themselves in their own society (Kugelmass, 1973). It is in this group that by doing they learn about the social processes of our culture. They seek clarification of their sex roles by acting and being responded to while learning competition, cooperation, social skills, values, and purposes of sharing the common life (Garrison, 1962).

Normal social development during this period is moving from like-sexed friendships to both unisexual and heterosexual relationships. Those who deviate too widely from the normal pattern of socialization because of peer group rejection are likely to show immaturity and gaps in their social development (Lambert et al., 1972). Relations both with the same and opposite sex peers in this period come closer to serving as prototypes for later adult relationships with members of the opposite sex (Conger, 1973).

Studies have shown, too, that students who are highly accepted by their peers are more successful in performance and class achievement. However, students who are rejected or neglected by their peers do not show clear-cut achievement patterns (Muma, 1971). In addition to making greater use of their academic abilities, a more positive attitude toward self and school is evidenced by highly accepted students (Lambert, 1969).

Conclusion

All of the factors thus far discussed lend positive credence to the importance of peer group acceptance during the mid-adolescent years. The development of a social, personal and sexual identity known as the process of individuation is strengthened and facilitated by membership in a peer group. Through association and acceptance by peers, the adolescent learns to resolve conflicts within himself and with others, to respect social competence necessary for the acquisition of maturity and autonomy, and to gain a source of feedback about his own personality and behavior.

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COMMUNICATION AND COUNSELING WITH PARENTS OF THE LEARNING DISABLED ADOLESCENT

Barbara Thomason

Counseling of parents by teachers receives little space in periodical literature. Though it is mentioned as an option in specific instances, this type of counseling is regarded by many professionals as taboo. When a teacher feels a parent is in need of help in modifying his system of values, emotional conflicts, or child-rearing practices, several options are suggested for her (the teacher's) use. First, she may relay this information to the proper personnel (school psychologist, counselor, etc.). This personnel will attempt to work directly with the parents or refer them to appropriate services. Secondly, the teacher may try to function as a counselor personally. Thirdly, the teacher may assess the situation as unchangeable and attempt no action. Each of these proposals has its problems. For instance, if a parent is to be referred, the resource personnel must be available, and the parent must have the time and means to go, as well as the willingness to carry out the recommendations. Though the teacher could serve as the counselor, it is questionable whether or not she is qualified for the responsibility. She is intruding in a very private domain, when in reality she is probably interested not in the total parent, but in those behaviors that directly affect the child. Also, such personal counseling is usually time-consuming and needs follow-up interactions. And, passivity (no attempt to alleviate the problem) can generate a defeatist attitude toward the

student, a feeling that everything will be undone anyway.

Another alternative that is proposed is that the parent be regarded as an ally in the educational process. Rather than try to change the parent's "psychic organization," the counseling should be directed toward educating the parent concerning his child's strengths and weaknesses, specific behavior management techniques, the elementary principles of learning, and developmental psychology. This education provides a new frame of reference rather than trying to destroy the old one. The ultimate purpose of this counseling is to establish a more perceptive and rewarding relationship between parent and child by providing support, encouragement, and a more positive perspective for the parent.

Effective counseling can only be done after a foundation of confidence and rapport has been achieved. Most teachers recognize the benefits of establishing a good relationship with the parents. Unfortunately, they too often learn the potential hazards and disasters of poor interaction through personal experience. Besides the unpleasantness of the situation and the increased difficulty of further contact with the parent, there is also the damage done to the child--damage that should be prevented by the teacher's skill and control in handling the personal relationship with the parent.

Teacher preparation at the undergraduate as well as the graduate level focuses on the instructional qualifications of the professional. Public relation skills are assumed to be out of the realm of preparation for the classroom, and therefore, such classes are not required. This rationale neglects a major factor in the behavior and attitudes of the student--the parents. In some cases, dealing with the parent rather

than the student is the solution to the problem, or at least the beginning of a positive change. For example, a parent may learn to engage in reasonable contracting or effecting a compromise with his adolescent. He may discard arbitrary restrictions or explain those that he considers non-negotiable. He may learn to listen, as a teacher must also learn to do. With these possibilities in mind, a teacher should not only be aware of the dynamics involved in the teacher-parent interaction, but be able to systematically control and direct that interaction to build and maintain an open, trusting line of communication.

It is not difficult to develop such a rapport with parents who share our philosophies of education, our perspective on children, and who provide us with students who are academically motivated, well disciplined, or at least relatively happy children. The difficulty is in establishing a good relationship with parents who engage in defeating child-rearing practices, who are negative in their feelings toward teachers or the school, and whose philosophy of education is in many respects diametrically opposed to our own, and who transmit their negative feelings to their children.

A good relationship must be preceded by acceptance of the parents as persons. This acceptance may be easier when the teacher readjusts her own perspective. Consideration must be given to the circumstances that make the parent react in the way he does. Unlike the teacher, the parents did not have advance preparation for their L.D. child. They did not have the benefit of training before facing the responsibility of the child. They have suffered through the trial-and-error approach to decision-making. Because of the difficulty of early detection and identification of the L.D. child, few parents are apprised of the situation

before the child enters school. That first year of poor success for the child may be a complete surprise if they have supposed the child to be bright. The lack of success may just confirm earlier suspicions that something was amiss, though they could not isolate the problem. Even after the child has had problems in school, without adequate screening, the child may still go undiagnosed. He may be considered a "late bloomer," a motivation problem, a behavior problem, or just immature. Whatever the label, parent adjustment is further postponed by the hope that the child will "outgrow it." If he doesn't outgrow it, parents often begin shopping around for someone who can tell them what is wrong and what can be done. They look for security in the jargon and erudition of educational authorities. They may get differing diagnostic information and conflicting prescriptive advice. If the authorities can't agree, you know you're in trouble.

The teacher's perception of the student may be very different than that of his parents. By the time an L.D. child becomes an adolescent, his learning problem is often compounded by an accumulation of negative school experiences. The teacher sees the child in relation to the current year and its effect upon him. His parents see him in the context of a whole history of school experiences, remembering those effects upon him. The teacher also has advantages in obtaining a more objective and broader perspective of the whole situation. She often has the benefit of other children of similar ages, a wider spectrum to be used as a basis of comparison. The parents' comparisons are generally more limited, perhaps to siblings and neighbor's children. Secondly, the teacher has been exposed to literature which should have provided a keener perspective. On the other hand, the literature that falls into the hands of the parent too

often may be oversimplified, misleading, or even erroneous. Thirdly, the teacher has the curriculum as a frame of reference to determine the severity of the child's skill deficits. The teacher can see the child as having or missing the component parts of his education. The teacher can compare the child's skills to a continuum of sequenced skills. The parent may be unable to accept this competence-based appraisal of the child, valuing only the more global grade equivalency score. It is often as discouraging to the parent as the child to know that the student is "grades" behind, and the work is continuing to get more difficult.

Communication between the parent and teacher can be facilitated in a number of ways. First, there is the traditional report card. It may use an A-F standard, or one that states that work is or is not satisfactory, or one that provides a checklist of skills and characteristics. Another form of communication is the written narrative. This may be a note, a total report, or comprise only a section of the report card as "comments." The teacher's phrasing and choice of words extends the communication dimension by revealing more about the teacher's subjective responses to the child and his work. A third form of communication is the telephone conversation. Again, a new dimension is added. Inflection, tone of voice, auxillary vocalizations (such as sighs, laughs, etc.), and pauses contribute to the communication process. The fourth form of communication is the actual meeting of the teacher and the parent. This meeting may be of a general nature, such as a PTA or a meeting of class parents. In this type of communication, the purpose would be to interpret the program, to establish a desired tone, or just to get acquainted. Another type meeting may be of a more personalized nature, as in a parent-teacher conference. Here the program might be explained if

it had not been in a previous general meeting. But, the emphasis would be on a specific child and his functioning in the program.

A survey of the literature provides a common set of suggestions for establishing rapport and promoting good-will between parent and teacher. However, there is need for research. There has been no factor analysis of the "dynamics" of the parent-teacher conference. In fact, there is more related literature of this type in the field of business than in education. In the business field, success is considered a product not only of professional skill and expertise, but of skillful human interaction. Instilling confidence, reinforcing appropriate behavior, providing verbal and nonverbal feedback, and managing environmental stimuli are all part of the business ethos. The teaching profession uses it when dealing with students. It is most commonly encompassed in the principles of behavior modification. It has as yet not been extended to dealing with the parents of those students.

Though many people are now more aware of the control one person can exert on the behavior of another, it takes more than a Dale Carnegie course to assure a successful relationship. Some of the more recent literature moves away from referring to communication as an art; some aspects of communication can be dealt with almost as a science. By observing the effects of communicative behavior, the "scientists" of communication can begin to formulate hypotheses and test them under controlled circumstances. They explore cause-and-effect relationships as well as correlational relationships. This field of study is still in its early stages. Much of the literature available is based on observational data obtained under very unscientific conditions. It makes good reading,

but poor research. Its primary function is to develop awareness of stimulus-factors that need to be considered and controlled when dealing with parents. This includes nonverbal as well as verbal communication.

Since the purpose of the "counseling" is to educate the parent and modify his frame of reference, it may be useful to introduce him to some basic vocabulary. Labels help to conceptualize and bring into focus some of the behaviors and events that the parent may not previously have been able to isolate. Observational skills may need to be trained or refined so that teacher and parent can compare home and school observations. However, jargon should be kept to a minimum. Abstract words or common words used in a technical sense can cause misunderstanding. Vocabulary that contributes to the precision and clarity of communication is valuable even if it must be taught before the idea is fully understood. It is the teacher's responsibility to ascertain whether or not she is understood. Do not assume knowledge on the part of the parent.

Before the counseling actually begins, it is necessary to assess the parent's values, beliefs, attitudes, etc. to gain insight regarding his particular perspective. Since formal and informal instruments seem presumptuous, the teacher will have to rely on data obtained from the child, the permanent records, from others (teachers, principals) who have had contact with the family, and from direct contact with the parent. The parent may or may not reveal much information. Skillful interviewing techniques should always be used to obtain as much useful data as possible without causing offense or suspicion. This information should be the basis of developing strategies to 1) avoid making the parent defensive, 2) give the parent encouragement and support, 3) reinforce the parent for behavior and thoughts that need to be strengthened, 4) in-

crease confidence in the teacher's professional judgment, 5) assure parent of the teacher's concern for the child's welfare, and 6) modify the parent's frame of reference by providing additional information regarding the education of his child emotionally, socially, and academically.

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READING DISABILITIES OF SECONDARY STUDENTS

Anne Perry

The late James E. Allen, Jr., former United States Commissioner of Education, cited these figures in 1969:

One out of every four students nation-wide has significant reading deficiencies.

In large city school systems up to half of the students read below expectation.

There are more than three million illiterates in our adult population.

About half of the unemployed youth, ages sixteen to twenty-one are functionally illiterate.

Three-quarters of the juvenile offenders in New York are two or more years retarded in reading.

In a recent United States Forces program called "Project 100,000" 68.2 percent of the young men tested fell below grade seven in reading and academic ability (Bormuth, 1973-74).

Further, more than three times as many poor readers drop out of school as good readers (Wilson, 1967). Students who lack a desire to read are frequently subject to ridicule and disciplinary action. It is sometimes assumed that there is no excuse for their poor reading habits. Certainly the inability to read, coupled with the lack of desire to read, leads directly to school failure.

The disabled reader, usually a boy, is an individual who recognizes that the majority of his school activities are unsatisfactory ones. He may see school as a long series of frustrations and failures. He may react to this frustration and failure in one of several ways. He may withdraw and avoid the reading process whenever possible. He may show resentment and become belligerent toward the reading process. He may try to hide his disability by showing a lack of concern. He may try to escape the reality of his problem by drifting and spending an abnormal amount of time with television and comic books. He may divert teacher's attention with behavior which is unacceptable.

The disabled reader is likely to do better in the early grades where required reading skills are less complicated and fewer. When he is introduced to the content areas and is expected to learn for himself from a textbook, the child's problems become more pronounced. He can no longer rely on his memory solely for word recognition. His arithmetic computation scores may remain relatively high, but his scores in all verbal areas usually fall below the norm. The student may be coaxed, misunderstood, bribed, threatened, and punished until he has no confidence in himself or in the school as a place that can ever be a happy or successful situation for him.

The disabled reader eventually causes problems in school, at home, and with his peers. Whether the pressure to achieve a grade level is subtle or direct, the disabled reader is likely to be a source of never-ending disappointments. The teacher may react by giving up on the student and feeling that he is lazy, indifferent, or a troublemaker.

Frustrated by rejection and labels, the disabled reader cannot or will not work independently. As more and more frustrating material is piled upon

him, he may busy himself with non-educational activities. He may decide that an education is just not worth the effort. As he falls behind in his school work, he is likely to have to repeat a grade, with the threat of further repetition constantly called to his attention. Excessive absenteeism and complete rejection of school are inevitable.

A disabled reader is often teased and taunted by peers. He is not sought after for committee work because his contributions are limited. He is not a member of the "in" group. Because he is often a year or more older than his peers, he recognizes that he does not "belong". If he continues to meet peer group disapproval, he is highly susceptible to undesirable influences and may become delinquent. Albert J. Harris (1967) reported that among a group of delinquents tested in New York, 76% were two or more years retarded in reading. Further, half of these were disabled five or more years.

Parents become very anxious when their son/daughter is not succeeding in school. Most parents are likely to see a solution to the problem by urging or forcing the child to "try harder". This is often attempted by simply piling on more and more of the same frustrating work which makes him reject school. When he balks, he may be compared openly with his sister, brother, or friends. Parents and the student may look for someone to blame. Even more important, the student is likely to look elsewhere for that acceptance which all students need from their parents. Because of his inability to solve his own problems, the future looks dark for him and to him.

To make matters worse, Margaret Mead (1974) stated, "As society becomes more complex, our definition of what it is to be human becomes more complicated." It is true that for most of human history, while it was

necessary to speak and speak correctly to be fully human, nothing as complex as reading was required. She believes that the person who cannot read is doomed to a life of contempt, low performance, and even psychosis. Dr. Mead points out that just as parents of long ago were worried when a child was found to be deaf and unable to speak, so today their anxiety mounts steadily as the child fails to learn to read. This anxiety may take several forms, she believes. If the anxiety is too great, it may result in too much pressure on the child, hostility to the school, or to the home if the teacher blames the parents for the child's reading difficulty. As the anxiety mounts, the accusations increase, and the child himself may grow more anxious and more hopeless.

Further, Dr. Mead has stated, ". . . so reading, which is today a prerequisite to full human status, is also a way in which individual differences may be developed or denied . . . ." She believes that those bits of learning over which the child stumbles become not ways of attaining awareness, but simply markers of despair.

Reports indicate that poor readers diagnosed in elementary or junior high school, as a group, continued to be poor readers in high school. A study of forty-three disabled readers and a follow up done five years later indicated the truth of this statement. The study was carried out in an effort to determine the relationship of electorencephalographic classification at diagnosis, and other variables, to high school reading performance. No relationship among EEG classifications at diagnosis and high school reading was found. WISC Verbal IQ and CA at diagnosis were found to be significantly and independently related to high school reading (Muehl & Forell, 1973-1974).

In another study, 59 subjects were given EEG's. All 59 had been

referred because of reading problems. None exhibited signs of gross sensory or neurological deficit. Findings included three classifications: (1) Normal EEG for age, (2) EEG with 14 and 6/sec. positive spike patterns, and (3) Abnormal EEG patterns other than 14 and 6/sec. positive spike patterns. The study compared EEG group findings with the WISC Full Scale IQ and Verbal-Performance IQ discrepancies, sub-tests and degree of reading retardation. It was found that 63% or 33 subjects had abnormal EEG records with 14 and 6/sec. positive spike patterns predominating. No difference among the groups of any WISC measures was found. Significantly less degree of reading retardation was associated with non-specific types of EEG abnormality when compared with the normal group. More of the parents of the best high school readers were in professional occupations than were parents of the poorest readers. It was concluded that a low Verbal IQ reflects a language deficit (Muehl & Forell, 1973-1974).

The relationship between rate of learning and long term retention was studied using 46 subjects with severe reading disability. Reports of efforts to establish a basis for matching students to methods of instruction have shown a disappointing lack of success. This may result from a lack of basic information regarding the nature of learning in these students. Without such information, it is difficult to approach the question of determining which abilities interact with instructional procedures to promote learning and retention.

Individual differences in learning rate may account for a large share of individual differences in reading achievement even among severely retarded readers. Students with severe reading disability would not be expected to show significant improvement as a result of increasing repetition alone (Camp, 1973).

The relationship of saccades and other components of vision has not been established. Measures of saccadic eye movements during reading consistently indicate that the poor readers make more fixations, more regressions, and have longer duration of fixation than do good readers. This is true of elementary, secondary, and college age readers (Griffin, 1974).

Camp (1973) found that disabled readers showed the same kind of learning curves as seen in normal students on a variety of learning tasks. This suggests that principles derived from the study of learning tasks in normal students probably can be applied to the majority of disabled readers.

The odds against the student with reading disability increases as he grows older. If the disability is discovered and help received in the first and second grades, the chances for success are 82%. If the help is delayed until the third grade when by tradition corrective work usually begins there is a 46% chance of success. The percentage drops to 42% if help is postponed to fourth grade and by seventh grade the possibility for success drops to 10% or even 5% (Clark, 1974).

Approaches to instruction of the disabled reader on the high school level varies. Karlin (1967) advocates the use of a laboratory remedial reading program based on continuing diagnosis and a complete sequential instructional program and a total learning situation. On the other hand Early (1973) states that even when students are wholly illiterate, they should not be assigned to reading skills centers. He suggests that older adolescents might be best served in an approach to reading through work-study programs where they can learn that verbal skills are useful.

Becker (1972) recommends a language-experience approach with adolescent and adult reading illiterates. Bortnick and Lopardo (1973) suggest the cloze procedure to help students develop use of contextual clues.

Adams and Shuman (1972) state that the most effective learning in reading occurs when students, even those with pronounced reading problems, assume the responsibility for teaching someone else to read.

Comic books are suggested to supplement book reading. It is pointed out that comic books contain a wide vocabulary and that this type of reading might prove to motivate the disabled secondary student. Uslan (1973) states, "The slower student, by means of this visual medium, can have his appetite whetted to go on to regular book reading."

Another innovative suggestion is that of using the guitar to teach reading. Songs, words, choral reading selections, familiar fold tunes and popular selections were used with grades four through six in the study. However, this approach might have implications for high school readers (Reading News Report, 1972).

Roe (1972) suggests that teachers rewrite the materials available in their schools on lower readability levels. It is suggested that this be done by simplifying the vocabulary and sentence structure. For any difficult words retained out of necessity, the concepts represented by the words should be taught. English, history, science, and literature could be rewritten in this way, and the Dale-Chall readability formula or a similar formula should be used before and after the material is rewritten.

Becker (1971) suggests inexpensive paperbacks. They are well accepted by students, have a wide diversity of content, and their wide range of levels of reading difficulty make them ideal reading material for students at all grade levels. The material is offbeat in the sense that it is not usually available through the numerous excellent educational paperback book clubs or other conventional sources. Becker recommends two titles especially for high school disabled readers, Best Cartoons of the Year by

Lawrence Lariar and Snappy Answers to Stupid Questions by Al Jaffe. These are particularly suitable for older disabled readers because they combine a relatively simple level of reading with a relatively sophisticated content and format.

A survey of the literature on reading disabilities on the secondary level shows a dearth of research. Statistics indicate that students with reading problems, deficiencies, and disabilities are handicapped in the social, home, and school environments. The disabled reader, often a male, may appear to be lazy, indifferent, or a troublemaker. This student often is unable to work independently, is preoccupied with non-educational activities, may have repeated one or more grades, has excessive absenteeism, and may become delinquent.

Approaches to instruction of the secondary disabled reader vary. Suggestions include work-study programs, laboratory remedial reading programs, language-experience, cloze procedure, student teaching students, a comic book format to supplement book reading, rewriting materials on lower readability levels, and inexpensive paperbacks.

There is need for further research and development of materials, approaches, learning strategies, and techniques for teaching secondary students with a reading disability.

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NEW TRENDS IN READING AND VARIOUS READING TECHNIQUES

Gail L. Gellman

In the past thirty years, the status of reading instruction in the secondary school has changed very little, and what changes have been made have been slow. In the 70's, as in the 40's, we are still debating the merits of special reading services and urging the whole school faculty to utilize some form of developmental reading in the content fields. Some major reforms have occurred: more trained reading specialists, a more clinical approach to diagnosis and remediation, and, in total, more emphasis on the skill of reading. But these changes have not been consistent in our schools, and very limited progress has been made in extending reading instruction to the twelfth grade. Only in the past several years have publishers turned to designing sophisticated tools that are appropriate for the severely lagging secondary student. Now the market is flooded with materials emphasizing the elementary student's interest, in order to get the younger student on the right track so we secondary teachers won't be so extremely frustrated. Kohl (1973) suggests, "there is no reading problem, there are problem teachers and problem schools. If talking and walking were taught in most schools we might end up with as many mutes and cripples as we now have non-readers" (p. xi).

According to the 1970 United States Census report (Petre, 1972) illiteracy for all persons fourteen years and older in the United States

was cut in half during the 60's and reached a new low, as 1.2 million individuals learned to read and write for the first time. Still, one of every 100 persons fourteen years or older is unable to read and write. Therefore, in my mind, the first priority of the 1970's is the elimination of illiteracy in this country, and the second is for citizens to improve their quality of reading. My personal priorities may be debated. Early (1972) suggests that for illiterate adolescents our goals should be modest. It is desirable to raise them to levels of functional literacy that will let them cope with the paperwork of our bureaucracy. Once these youths have reached functional literacy they should no longer be assigned to reading skills courses or study centers. For older adolescents, the best approach to reading may be through work-study programs where they can learn (without being told) that verbal skills are useful too.

Work-study programs and developmental reading clinics may justifiably be debated. And what happened to the reading specialists of late who found themselves in open classroom schools? Sophisticated reading laboratories stocked with equipment from federal funds became the 'in thing'. However, it seems as if teachers who enthusiastically experimented with openness and freedom were not ready to undertake the teaching of reading and study skills in their subjects, though they may have been willing to send students to skill centers. Malamud (1974) has reported that many open schools have failed to teach the basics to our students. For the past ten years average national scores on the Scholastic Aptitude Tests have fallen. Most cities and a growing number of suburban and rural areas report a similar decline on national tests of reading and math achievement. The trend today seems to be moving back to structure

and confirmation of the basic skills.

One compromise in secondary schools is the elective course offerings which have swept the scene. Early (1972) mentions the Apex program of Trenton, Michigan, for example, which offers electives in basic and advanced reading skills. Electives in vocabulary development and speed reading are common in other schools. Short term intensive courses in study skills are essential when students are engaged in independent studies for the rest of the day.

Hand in hand with elective course offerings is the concept of modular scheduling. Here combinations of fifteen to twenty minute modules of time have replaced the traditional forty-five minute periods. This scheduling allows for more appropriate allocation of time to meet the need of each experience, dictated by the complexity of the subject matter and skills of the student. Schottenfield and Lang (1973) describe the reading resource center at Schreiber High School as a dynamic focal point for school learning. The attempt to accomodate the individual academic needs of the total school population is manifested in a fourfold non-graded program of intensified reading, developmental reading, elective course development, and the open lab. In modular scheduling there is a shift in the focus of learning from the teacher to the student, from the classroom to the resource areas of the school. Modular scheduling allows the school to offer a variety in the reading course content and perhaps is a viable alternative to the traditional "remedial" classroom, with further expansion of the reading labs.

Aside from examining new trends in reading as well as high school curriculum changes, I would like to cite some various new or adapted techniques which I found exceptionally interesting as described in the

recent literature. They are the Language Experience Approach, peer tutoring, paperbacks in reading motivation, and the use of the typewriter.

The effectiveness of the Language Experience Approach in combating adolescent illiteracy has been increasingly recognized. All adolescents possess an oral language facility which can be utilized advantageously in view of their experiences, interests, attitudes and motivation. Although in the past this technique has focused mainly on young children at the beginning stages of reading, the Language Experience Approach can be continued to be adapted at higher levels. It is also to be recognized that most adolescents with any learning problems need the direct deliberate training in discussion skills and practical communication which actually constitutes the first step in the Language Experience Approach. Teachers can utilize the process to manifest discussions and such higher level skills as outlining, sentence patterns, and paragraph development. Most importantly the four aspects of listening, speaking, reading and writing are employed.

Peer tutoring is presently available to students in seventy-eight centers in fifty-eight high schools in New York City. These services have been made possible through the High School Homework Helper Program, an after school project funded by the New York State Urban Education Project, directed by Dr. Alpert Deering. Hassett (1974) describes the program as a concrete meaningful way to share skills commutatively between peers. The only students eligible for the services are those who are two years or more below grade level in reading and math. These pupils may receive tutoring in any high school subject, with emphasis on improving basic study and reading skills. Each center is staffed with a Master Teacher, a Teacher Aide, an Educational Assistant and fourteen

high school student aides to provide tutorial services. Some tutors have only recently overcome the weakness they in turn teach.

Parallel to the peer-tutor concept, Baer and Fisher (1972) describe a program they designed utilizing the students in their reading classes to act as teachers. When a student becomes the teacher, he is responsible for conveying information and for maintaining class control. The typical class lesson taught by a student may be a form of oral reading. During the lesson the student teacher sits at the front of the class, calls upon the students to read portions of the material and to answer questions. The student might go over spelling and vocabulary words for the week, having individuals pronounce, spell, and use the words in a sentence.

Corley (1974), an eighth grade English teacher in Baton Rouge, Louisiana, designed a unit called, "Paperbacks--A Unit for Reading Appreciation." She hoped that pupils would find in this unit an opportunity to choose their own materials, time to read at their own level and pace, opportunities and means to express their impressions concerning their reading, and the creation of a greater interest in reading. Each pupil was to read at least one book, to read during each class period, to keep a journal of thoughts and reflections about the reading, to participate in small and large group discussions, to complete one project or activity as a culminating activity. Outstanding effects noted immediately and continuously were the enthusiasm, the smile, and the "esprit de corps" which surrounded the activities (described by Baer). Books varied from True Grit to Passport to Romance. The "can't and won't" readers read when they were motivated by their selection.

Fuhr (1972) designed an experimental study in which four groups of

16 high school students reading two or more years below grade level were randomly assigned either to a five days per week class in remedial reading, five days per week class in beginning typewriting, both a five day per week class in beginning typewriting and remedial reading or the control group. Fuhr taught the remedial reading classes, and the chairman of Secretarial Studies taught the beginning typing class. All classes met for twenty consecutive weeks. The findings of this experiment suggested that the experimental procedure of teaching typing techniques rather than remedial reading resulted in greater increase in reading achievement than achieved when remedial reading was taught by the high school English teacher. Perhaps all students should be taught typing for the purpose of either learning or reinforcing basic reading skills. Maybe we should investigate designing typing books to teach both beginning typing and initial reading skills simultaneously. Or perhaps trained teachers of typing should teach remedial reading classes.

I felt it was imperative to mention the above examples of some of the newer ideas in reading techniques which dominate the literature in the reading journals. It seems as if educators are consistently searching for programs that are effective in combating the reading problem in the secondary schools. As suggested in my introduction, special reading services provided the student in a laboratory situation are still debated. Many studies have indicated that there is very little transfer from reading classes to content classes, or even to personal reading and study habits. Kennedy and Getz (1972) suggest that reading is a personal, cognitive experience. It cannot be isolated into a set of "skill" activities. Therefore, it is the content teachers' responsibility to know and utilize the most effective and satisfying systems of "reaching" that